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U.S. BANKRUPTCY COURT WESTERN DISTRICT OF OKLAHOMA TRANSCRIPT-MULTIMEDIA REQUEST ORDER FORM

1. ORDER REQUEST	2. DATE OF ORDER
TRANSCRIPT* MULTIMEDIA	A
3. NAME OF PERSON ORDERING	4. EMAIL ADDRESS
5. MAILING ADDRESS	6. PHONE NUMBER
7. CITY AND STATE	8. ZIP CODE
9. CASE NUMBER OF HEARING	10. CASE STYLE OF HEARING
7. CASE IVENIBLIK OF TILFIKHIVE	10. CASE STILL OF TILIMING
11. JUDGE PRESIDING AT HEARING	12. DATE(S) OF HEARING
	From to
13. ORDER IS FOR: APPEAL BANKRUPTCY ADVERSARY OTHER	
Opening Statement (Plaintiff) Opening Statement (Defendant) Closing Statement (Plaintiff)	of the hearing requested) Court Ruling Only Testimony of (Specify Name)
Closing Statement (Defendant) Entire Proceeding	Other:
15. TRANSCRIPTS ONLY: Select the transcript rate from the drop down box below, indicating the	
amount of time requested to prepare the transcript.*	
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https://www.uscourts.gov/services-forms/federal-court-reporting-program#rates	
16. NUMBER OF COPIES REQUESTED: Transcript request includes 1 copy for the Court. Transcript* Multimedia	
By signing below, I certify that I will pay all charges for the preparation of the transcript, including the deposit and additional charges as specified by the assigned court reporter/transcriptionist:	
Signature of Person Ordering	Date

^{*}For expedited, 7-day, 3-day, Next-day and Realtime transcript requests, you must contact the Court Clerk's office one week in advance of the hearing.

Rev 03/14/24